

Minutes of the Health and Human Services Joint Board/Committee Meeting

Thursday, June 12, 2008

The meeting was called to order at 1:03 p.m. by Board Chair Dennis Farrell and Committee Chair Duane Paulson followed by the Pledge of Allegiance.

Committee Members Present: County Board Supervisors Duane Paulson (Chair), Janel Brandtjen, Kathleen Cummings, Jim Jeskewitz, Gilbert Yerke and Bill Zaborowski. **Absent:** Pauline Jaske.

Board Members Present: County Board Supervisors Duane Paulson, Jim Behrend, Janel Brandtjen, Jim Jeskewitz, and Citizen Members Dennis Farrell (Chair), Flor Gonzales, Mike O'Brien, Dr. Peter Parthum and Joe Vitale. **Absent:** JoAnn Weidmann.

Others Present: Chief of Staff Lee Esler, Health and Human Services Director Peter Schuler, HHS Deputy Director Don Maurer, Senior Financial Analyst Clara Daniels, Financial Analyst Bill Duckwitz, Employment Services Manager Sue Zastrow, Public Health Manager Dr. Nancy Healy Haney and Adolescent and Family Services Division Manager Peter Slesar.

COMMITTEE AGENDA ITEMS

Approve Minutes of 4-10-08

Minutes were previously approved at an earlier meeting of the Committee.

Approve Minutes of 5-29-08

MOTION: Zaborowski made a motion seconded by Cummings to approve the minutes of May 29, 2008. The motion was voted on and carried 6-0.

Meeting Approvals

MOTION: Cummings made a motion seconded by Jeskewitz for Committee members to attend and approve mileage for the Care Wisconsin Opening Ceremony on July 24, 2008 in Waukesha. The motion was voted on and carried 6-0. Esler stated that this will be posted for agenda purposes as a meeting of the Health and Human Services Committee.

Announcements

Paulson announced that Mary Pedersen will send out a list of future agenda items to the Committee members.

BOARD AGENDA ITEMS

Approve Minutes of 4-10-08

MOTION: Paulson made a motion seconded by Behrend to approve the minutes of April 10, 2008. The motion was voted on and carried 9-0.

Advisory Committee Reports

Farrell reported that the DDAC met yesterday and in response to a request made the month previously for a member from WCTC to become part of the DDAC, they received a letter from WCTC stating they did not think it necessary for the WCTC representative sit on the DDAC.

Meeting Approvals

MOTION: Vitale made a motion seconded by Jeskewitz for Board members to attend the Care Wisconsin Opening Ceremony on July 24, 2008 in Waukesha. The motion was voted on and carried 9-0.

Future Agenda Items

Farrell suggested that possibly sometime in the future we listed to a report from UWM School of Public Health.

COMMITTEE AGENDA ITEMS

Paulson announced that Pauline Jaske called in to report she would not be able to attend today's meeting.

Cummings asked that until new members understand all the acronyms, can members use the full name? Farrell passed around a booklet of acronyms, but Schuler stated that we will include a list of most commonly used acronyms in the binders members will be receiving.

Ordinance 163-O-018: Repeal and Recreate Waukesha County Code of Ordinances to Abolish the Commission on Aging, to Delineate Certain Duties of the Aging and Disability Resource Center, and to Establish the Aging and Disability Resource Center Advisory Board

Cathy Bellovary, Director of the Aging and Disability Resource Center, gave a presentation regarding this ordinance. She passed around a copy of the ADRC Governing Boards. The old code for the Department of Senior Services had to be repealed and changed from the Commission on Aging to the Aging and Disability Resource Center Advisory Board. The membership will include those folks presently on the Commission on Aging, members of the Long Term Care Committee which will be dissolved once all clients are transferred over, and some members of the DDAC. They are required to have 51% of aging representation on the committee and represent the other target groups which include those with physical disabilities, developmental disabilities and mental health and substance abuse. The County Executive has proposed a number of people from these representative groups to serve on the ADRC Advisory Board. This new ordinance is dissolving the Aging Unit and recreating in the code the ADRC. They are going from 12 members to 13 members and the 13th member shall be a county board supervisor. William Zaborowski has agreed to fulfill that role. Esler pointed out the on line 38 of the ordinance, the wrong statute number is listed, it should be subsection (a) and not (b). That has been changed. Esler stated there was another item of confusion. The County Board office received 12 appointment letters and there should be 13 according to the ordinance. The Executive Committee on Monday will have the appointment letter for the 13th member who shall be Sandy Wolff. All 13 appointments will be on the County Board agenda.

Supervisor Yerke pointed out that lines 46 through 51 of the ordinance read differently than the handout on Aging and Disability Resource Center Governing Board. After some discussion regarding the wording in the bulletin and the ordinance as far as the representatives that were being appointed to the ADRC Advisory Board, this was explained to the satisfaction of all members. Bellovary also stated that because everyone is starting fresh on this Board, some will be one, two and three year terms to start instead of serving the full three years so they have the standard appointments and re-appointments instead of all at the same time in the future. Esler stated that this ordinance also abolishes and re-writes Chapter 8. The Aging Commission will be abolished. The Aging and Disability Resource Center Advisory Board functions as the former Aging Commission as well, so the large part of the representation (at least 51% or greater) are the elderly. Other sections of the code must be re-written particularly the duties of the Health and Human Services Committee because they are no longer responsible to oversee the Department of Senior Services or the Long Term Care Planning Committee or the Aging Commission. The Long Term Care Planning Committee will probably be in existence until January of 2009

MOTION: Jeskewitz made a motion seconded by Cummings to approve the ordinance. All voted and the motion carried 6-0. Paulson stated that the Health and Human Services Committee will be the presenting committee on this ordinance before the full County Board.

Ordinance 163-O-019: Create One Position of Criminal Justice Collaboration Coordinator and Abolish One Position of Programs and Projects Analyst

Sue Zastrow presented the information on this ordinance. She stated they looked at the overall responsibilities and how this position was functioning and what the Council needed in order to receive the necessary services from the position. The CJCC has evolved over the past 5 ½ years since it was created and now requires a person with leadership and facilitation skills. They also felt it appropriate at this time to remove the sunset clause because it wouldn't make any sense to recruit someone if the position was ending in December. The new position is rated at a higher level – open range 11, but added wording that they may have to underfill the position as a Programs and Projects Analyst for a while if they don't find someone with all the traits and knowledge needed to fully perform this position. In that case, a person with a little less experience might be selected and they would have the ability to grow into the full position. Brandtjen asked about the funding difference between the position as it currently is and the new position. Clara Daniels stated there is a difference of \$3,200 for this year and for 2009 about \$8,000. Schuler stated that this position is responsible for the programs of the CJCC and that they are correctly targeted, properly evaluated, grow or not grow at a pace that will help balance the institutionalization or the de-institutionalization processes. The CJCC needs someone who can monitor the services purchased from vendors and who can study data trends in the county to properly manage the various programs. There is no line level leadership in the Council, everyone has to collaborate and partner and work together and the Coordinator has a major responsibility of attempting to get that to happen. The functioning part of making sure the Council has information from the outside, write grants, seek new ideas, refine those, recommend ideas to the Council after evaluation and study – that's the leadership desired from the new position.

Cummings asked about the open range 9 and open range 11. What happened to 10? Zastrow stated that whenever they evaluate a new position they take it to the job content evaluation committee and that committee will analyze what they are being told about the job, the level of

knowledge needed, the level of problem solving and the level of accountability. From this information, they get a score and based on that score it is slotted into ranges and the point total this position received was high enough to put it into open range 11. Zastrow explained that typically when ranges are set up is when someone is promoted they often skip a range because they are moving up to the ranges and they overlap. This position is a non-represented position and would be eligible for performance awards. We are hiring in-house and not using a firm.

MOTION: Cummings made a motion seconded by Zaborowski to approve the ordinance. The motion carried 6-0. The presenting committee will be the Personnel Committee.

BOARD AGENDA ITEMS

Approval of Change in Status for Psychiatric Positions

Farrell stated that Mike O'Brien has accepted the role as Chair of the Joint Conference Committee. The changes in status for the psychiatric positions included the resignation of Dr. Jean Oehschlager and the change of Dr. Antoinette Ducrest from Active to Associate due to her change from employed to contracted status.

MOTION: Behrend made a motion seconded by Jeskewitz to approve the resignation of Dr. Oehschlager. The motion carried 9-0.

MOTION: Jeskewitz made a motion seconded by Behrend to approve the change in status for Dr. Ducrest. The motion carried 9-0.

JOINT BOARD/COMMITTEE AGENDA ITEMS

Public Health Update

Dr. Healy Haney spoke of the flooding of the last couple of weeks and that they have been operating in an emergency situation. They have put together flyers and information they are passing out regarding water, hygiene and sanitation not to mention many others. We have been coordinating with the City of Waukesha EOC since Monday. Public Health along with Salvation Army have been able to release a truckload of clean-up supplies. The County will pick-up the cleaning supplies and distribute them through the municipalities. The Public Health building has flooded so they have 9 displaced employees and today they had a gas leak and had to evacuate. No records or equipment was damaged in the flood at Public Health. Dr. Healy also stated that the County is making available water test kits for \$20.00, but you can get them from the State Division of Public Health at no cost. There are wells that are contaminated and they are coordinating with Environmental Health to have these tested.

When asked about the measles situation, Dr. Healy Haney stated that even though we only had two confirmed cases of measles and two cases of rubella, there is a lot of checking to do because kids under the age of 1 have not been vaccinated. They did have a gentleman in Milwaukee who works in a factory in Waukesha so numerous others had to be checked. Many clinics don't want people with suspect measles in their offices because they don't have reverse flow and would have to evacuate their building for three hours afterward. Public Health brought them in one door after hours and out another door. They also went out and did blood draws for people at their homes because they might be infected. As of June 8th, the State declared an end to the outbreak period as the incubation period has passed – unless new cases are reported, in which Public Health would be brought back in.

Dr. Healy Haney stated that between now and September Public Health has to do 10 additional immunization clinics. They will be immunizing up to 7,000 children because there is a new state law that children in 6th, 9th and 12th grade need to be brought up to date on their tetanus, diphtheria, and pertussis vaccine. They are going to do in the space of three months what they usually do in a year. Because of the need to respond to the recent outbreaks, the Public Health Division has pretty much been cut in half since May because one side is incident command and the other is normal business continuity. One of the staff, Caroline Lazar, was involved in a new initiative this year with Menomonee Falls and the Rotary and they did a great campaign up there to boost immunity status and they did have good results.

Dr. Healy Haney also reported that they have 7 active cases of tuberculosis right now and that is a lot. Generally we have about 3 per year. With these cases they have to do directly observed therapy, which means that even on holidays and weekends she still has to have staff go out and observe to insure treatment, because many of these people are high risk. She then gave an example of one of their TB cases.

Adolescent and Family Division Presentation

Peter Slesar, Manager of the Adolescent and Family Services Division, handed out a copy of the Division's mission statement along with a description of the Juvenile Service Units, the Family Services Units and the Juvenile Center. He indicated his intent to broadly explain the services that are provided and purchased in the Division. He also handed out a copy of the powerpoint presentation. Slesar started out by going over the Mission Statement and the Philosophy of Service. The Division subscribes to the philosophy of Restorative Justice. Whenever possible, the best way to address a young person's areas of conflict whether it be the law, school or family, is to work in partnerships with the youth's family. They focus their efforts on strengthening and supplementing parental authority and not replacing it. Slesar went over the Wisconsin Juvenile Code which incorporates the balanced approach to restorative justice. He read over the population that they serve which is generally teenagers and their families.

Slesar then went over the three units that make up the Adolescent and Family Services Division. The Juvenile Services Unit is made up of two areas, there are two Family Services Units and the last is the Waukesha County Juvenile Center. The information Slesar provided is written in the descriptions of the Units which was handed out at the beginning of the presentation. The two Juvenile Services Units provide court and custody intake services to alleged and adjudicated delinquent and status offenders as well as ongoing social work, case management and court-mandated services. The two Family Services Units receive cases from Juvenile Court Intake for school truancy referrals, which are made by the local school district, as well as law enforcement referrals for sexual assaults requiring therapeutic as well as legal intervention, and for runaway and uncontrollable behavior. One additional area in Family Services not included in the description is for sexual offenders who require ongoing treatment. There is a Family Intact Treatment Team (FITT) which provides in-home counseling when there have been cases of sexual abuse. If they have any young people who are referred for any type of sexual offense and who it is believed have unresolved sexual issues that need to be addressed they are opened up to the FIT team. They work with the whole family in a family setting, with preventative and protective controls in place as might be necessary. The Juvenile Center combines secure detention and non-secure shelter care services for males and females, ages 10 – 17, with the

majority being ages 15 to 17. Secure detention is a locked facility and non-secure is a shelter care. Also housed in the Juvenile Center is the Juvenile Court and Court offices.

Slesar then went over a chart of the placement rates over the last decade. The first column shows the number of cases they had (in both the Juvenile Services Units and the Family Services Units). The next column is the number of juvenile that were placed in out of home placements. He noted that as one can see by the overall numbers, they are successful in maintaining young people in over 98% of the cases over the last decade. After working in the Alternate Care Unit for over 15 years which is the unit which handles all the out-of-home placements, one conclusion he has come to is that whenever they have to place young people, they have added one more problem to the many problems, they and their family have to face. There are definitely times that it does have to be done, but it does create one more issue. There is an emphasis throughout the Department to try and work with families and keep them together. The lower placement rate is the result of many things – hard work on the part of the families they are working with, on the part of the staff, and also various services we have had available, and which have demonstrated excellent outcomes, which have led to our judges being willing to keep these young people in their homes with in home services and interventions. Over the years, they have been able to show the court that when we recommend that a young person stay at home, that we are able to provide the services while insuring community protection and personal accountability. This is the reason why, when looking at statewide statistics, Waukesha County historically has always been one of the lowest placing counties.

Slesar then shared an example of a case where a juvenile had committed an armed robbery, his parents were very motivated to get him help. The ongoing worker did further assessments and the division recommended that the young person be placed on supervision for one year, placed on the electronic bracelet, placed on homebound detention and intensive tracking. He would go through the victim offender panel and he would do community service. The court agreed with the department and placed him in the home under supervision. In some jurisdictions, the act of armed burglary would have served as an automatic ticket into corrections. They have found that when you put a young person in corrections, they are exposed to many other juveniles and the combination can make things worse because they learn a lot that they never would have thought of by themselves. By keeping them in the home, we can help them learn how to establish themselves with a stronger peer group, change thinking, and provide them tools to avoid future difficulties and legal encounters. Slesar reported that this young person is doing very well. The chart that Slesar had handed out broke down all the costs involved for this particular individual. There are two figures for the Juvenile Center – one is fixed costs which they would have had even if this individual were not there. The total cost excluding the fixed Juvenile Center costs is \$6,866.49 compared to 207 days in corrections which would have cost \$53,613.00 (about \$100,000 per year per placement).

Following Slesar's presentation there was discussion regarding the determination of an intake and what unit serves the juvenile, the numbers served in each unit and are they duplicated (cross-over from one unit to another, and discussion of what makes juveniles act out. When asked about recidivism, Slesar stated that over the last decade it has been about 26.5% (three out of four don't re-offend), and we use broader time period to measure recidivism than is usually used – so we hold ourselves to a stricter outcome standard. Slesar also stated that nationwide in 2000

the average recidivism rate was around 50%. We do get involved in restitution and not the courts. The court makes the order, but we monitor the payments and if not being made they take it back to the court. Jeskewitz, who taught school for 35 years, stated that 90% of the kids who got into trouble in high school were not involved in any school or extracurricular activities such as band, sports, etc. Esler asked about the licensing for secure and non-secure. Slesar explained that they do have separate licenses, but staff have dual licenses so they can work on either side.

Supervisor Cummings left at 3:40

Tour Juvenile Center

Committee and staff members then took a tour of the Juvenile Center.

Adjournment

MOTION: Jeskewitz made a motion seconded by Brandtjen to adjourn the Health and Human Services Committee meeting. The motion carried.

MOTION: Jeskewitz made a motion seconded by Brandtjen to adjourn the Health and Human Services Board meeting. The motion carried.

Minutes recorded by Kathy Leach

Approved on _____
Date